

Predictors of Life Satisfaction in Elderly African Americans

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Statement of the Research Problem

There has been increasing interest in the well-being of the elderly population in the United States. One specific area of interest has been the examination of factors that influence life satisfaction of individuals who grow older in our society. Investigation of this heightened interest in life satisfaction suggests that it essentially can be associated with three interrelated factors: 1) the growing number and proportion of elderly to the general population, 2) understanding the general premise of successful aging, and 3) the consequences of longevity that influences the overall quality of life for the elderly. To determine whether the elderly have adapted to aging, it is important to obtain their input. For them, self-rating of life satisfaction is recognized as a principal measure of effective adaptation to aging and well-being (Atchley, 2000; Mannell, 1999). This study sought to identify factors independently associated with life satisfaction of elderly African Americans, and to test a multivariate model that explains the relationship between sociodemographics, spirituality, social networks, social support, and social activity on the life satisfaction in older African Americans.

Research Background and Hypotheses

Among the social demographics, social networks, social support, social activity, and spirituality, which factor was the most influential in predicting the life satisfaction of elderly African Americans? What were some of the health conditions of the elderly African Americans who participated in activities at the senior centers? A third question addressed to what extent, if any, these conditions interfered with the seniors' level of activity.

Research Hypotheses

H₁: For elderly African Americans, social activity is positively related to life satisfaction.

- H₂: For elderly African Americans, social networks is positively related to life satisfaction.
- H₃: For elderly African Americans, social support is positively related to life satisfaction.
- H₄: For elderly African Americans spirituality is positively related to life satisfaction.
- H₅: For elderly African Americans, social demographic factors, social networks, social support, social activity, and spirituality independently or in some combination predict life satisfaction.

Methodology

A survey research design was employed to conduct this exploratory study. Personal interviews were used to collect data from the participants who participated in activities at the senior centers. The study was conducted in Pulaski County; an area comprised of 771 square miles and located in the central section of the state of Arkansas. The county has urban and semi-urban development areas that provided a heterogeneous sample of elderly African Americans. A convenience sample of 217 elderly African Americans was selected through recruiting participants at senior centers in Pulaski County. The interviews were conducted using the Life Satisfaction Interview Schedule, which consists of a series of items designed to solicit information about the sociodemographic characteristics of the participants, their subjective health status and health conditions, social activity, social networks, social support, spirituality, and life satisfaction.

The data analysis procedures included the use of the Statistical Package for Social Science (SPSS). Three levels of statistical analysis were employed in this study. Univariate analysis (i.e., descriptive statistics) was used to examine the distribution of cases on a single variable and to describe selected characteristics of the sample. Bivariate analysis involved the use of Pearson product-moment correlation coefficient (or Pearson's *r*) to analyze the relationship between two continuous variables. Hierarchical multiple regression analysis was conducted to determine the strongest predictor(s) of life satisfaction.

Results

The 217 participants ranged in age from 65 to 101. The majority of the participants were female (65%) and between 65-74 years of age (65.7%). Approximately half of the participants (45.5%) were widowed and only 6.0% had never been married. Over half of the participants (57.6%) lived alone. The modal level of education attainment was completion of high school/GED. The largest portion of the participants (25.7%) received \$500 to \$799 monthly (See Table 1). Participants indicated whether or not they had a particular health condition, and to what extent the condition interfered with their usual activities (See Table 2). Slightly more than 42% of the individuals indicated that arthritis/rheumatism interfered with their activities a little, while only 15.2%

indicated that it affected their activities a great deal. Hypertension, the second largest group of conditions reported, was indicated by 37.8% of the individuals as interfering with their activities a little and by only 10.6% as interfering a lot. Pearson correlation revealed that social activity and social networks had a significant relationship with life satisfaction. In the final hypothesis, the economic well-being variable emerged as the primary predictor of life satisfaction. The remaining predictors were health status, education, social networks, spirituality, and gender. Elders who indicated low economic well-being, low subjective health status, and had formal education levels that ranged from one to the eleventh grade reported high levels of life satisfaction (See Table 3).

Utility for Social Work Practice

Culturally diverse social work practice requires practitioners to work with clients from the perspective of cultural awareness (Lum, 1999). Cultural and ethnic diversity also entails recognizing the religious orientation and/or spiritual beliefs of various ethnic groups (Reamer, 1998). This study provides evidence that spirituality should be incorporated into culturally diverse social work practice. To ensure that all of the elderly clients' service needs are addressed, it is imperative that practitioners become familiar with ways to embrace the relevance of spirituality for aged clients and explore its meaning and importance early in the assessments of clients.

Establishing the function of social networks in life satisfaction of elderly people is significant. At the senior centers, interventions that are aimed at enhancing life satisfaction could place greater emphasis on developing small group activities that encourage intimacy and friendship. Carefully designed small groups may strengthen relationships among the senior centers' participants. Understanding the contributing factors to successful aging will serve to inform both public policy development and more effective design of services for elderly.

It is increasingly important for social workers to become knowledgeable about aging (Rosen & Zlotnik, 2001) and the role of ethnicity in the aging process. The results of this study may be used to enhance curricula for designing gerontological social work. The findings regarding low educational levels and economic well-being have implications for acknowledging the strength perspective of elderly African Americans. Social work education should place more emphasis on teaching students to become more skillful at reinforcing the strengths perspective in curricula on aging. Information from this study also contributes to the importance of understanding ethnic variation and diversity in the elderly (Markides, 1998).

References

- Adams, V. (1999). Predictors of African American well-being. *Journal of Black Psychology*, 25 (1) 78-103.
- Akbar, H. (1984). Africentric social science for human liberation. *Journal of Black Studies*, 14 (4), 395-414.
- Asante, M. K. (1987). *The Afrocentric idea*. Philadelphia, PA: Temple University Press.
- Atchley, R. (1998). Activity adaptations to the development of functional limitations and results for subjective well-being in later adulthood: a qualitative analysis of longitudinal panel data over a 16-year period. *Journal of Aging Studies*, 98 (1), 19-39.
- Black, H. (1999). Life as gift: spiritual narratives of elderly African American women living in poverty. *Journal of Aging Studies*, 13 (4), 441-456.
- Bowles, J., Brooks, T., Hayes-Reams, P., Butts, T., & Kington, R. (2000). Frailty, family, and church support among urban African American elderly. *Journal of Health Care for the Poor and Underserved*, 11 (1), 87-99.
- Chen, Chaonan (2001). Aging and life satisfaction. *Social Indicators Research*, Apr. 2001, 54 (1), 57-82.
- Coke, M. (1992). Correlates of life satisfaction among elderly African Americans. *Journal of Gerontology: Psychological Sciences*, 47 (5), P316-P320.
- Daly, A., Jennings, J., Beckett, J. & Leashore, B. (1995). Effective coping strategies of African Americans. *Social Work*, 40 (2), 240-248.
- Diener, E., Gohm, C., Suh, E., & Oishi, S. (2000). Similarity of the relations between marital status and subjective well-being across cultures. *Journal of Cross-Culture Psychology*, 31 (4), 419-436.
- Ellison, C. and Levin, J. (1998). The religion-health connection: evidence, theory, and future directions. *Health Education and Behavior*, 25 (6), 700-721.
- Everard, K. (1999). The relationship between reasons for activity and older adult well-being. *Journal of Applied Gerontology*, 18 (3), 325-340.
- Fries, J. (1989). The compression of morbidity: Near or far? *Milbank Quarterly*, 67, 208-232.
- Graney, M. (1975). Happiness and social participation in aging. *Journal of Gerontology*, 30 (6), 701-706.
- Jacob, M., & Guarnaccia, V. (1997). Motivational and behavioral correlates of life satisfaction in an elder sample. *Psychological Reports*, 80, 811-818
- Jagers, R. J., & Smith, P. (1996). Further examination of the spirituality scale. *Journal of Black Psychology*, 23, 429-442.

- Katz, S. (2000). Busy bodies: activity, aging, and the management of everyday life. *Journal of Aging Studies, 14* (2), 135-153.
- Krause, N. (1993). Race differences in life satisfaction among aged men and women. *Journal of Gerontology: Social Sciences, 48* (5), S235-S244.
- Levin, J., & Chatters, L. (1998). Religion, health, and psychological well-being in older adults: findings from three national surveys. *Journal of Aging and Health, 10* (4), 504-532.
- Lubben, J., Girona, M., & Lee, A. (2001). Refinements to the social network measurement scale: The LSNS-R. *The Behavioral measurement letter, 1* (2), In press.
- Luckey, Irene (1994). African American elders: The support network of generational kin. *Families in society, 75* (2), 82-90.
- Lum, D. (1999). *Culturally competent practice: A framework for growth and action*. Pacific Grove, CA: Brooks/Cole Publishing Company.
- McIntosh, B., & Danigelis, N. (1995). Race, gender, and the relevance of productive activity for elders' affect. *Journal of Social Psychology, 138* (1), 72-83.
- Markides, K. (1998). Challenges to minority aging research in the next century. *Journal of Gerontology, 38*, (5), 621-625.
- Martin, W. (1973). Activit Mattis, J. (2000). African American women's definitions of spirituality and Religiosity. *Journal of Black Psychology, 26* (1), 101-123.
- Mookherjee, H. (1998). Perceptions of well-being among the older metropolitan and nonmetropolitan populations in the unite states. *Journal of Social Psychology, 138* (1), 72-83.
- Oishi, S., Diener, E., Lucas, R., & Suh, E. (1999). Cross-cultural variations in predictors of life satisfaction: perspectives from needs and values. *Personality & Social Psychology Bulletin, 25* (8), 980-991.
- Potts, M. (1997). Social support and depression among older adults living alone: The importance of friends within and outside of a retirement community. *Social Work, 42* (4), 348-363.
- Rao, V., and Rao, V. (1983). Determinants of life satisfaction among black elderly. *Internationaournal of Aging and Human Development, 16* (1), 35-48.
- Rogers, A. (1999). Factors associated with depression and low life satisfaction in the low-income, frail elderly. *Journal of Gerontological Social Work, 31* (1/2), 167-194.
- Rosen, A., & Zlotnik, J. (2001). Social work's response to the growing older population. *Generations, 24* (1), 69-72.
- Rowe, J. W., & Kahn, R. L. (1997). Successful aging. *The Gerontologist, 37*, 433-440.

- Scheidt, R., & Humphreys D. (1999). Successful aging: What's not to like? *Journal of Applied Gerontology*, 18 (3), 277-283.
- Schiele, J. (1996). Afrocentricity: An emerging paradigm in social work practice. *Social Work*, 41 (3), 284-294.
- Simmons, H. (1998). Spirituality and community in the last stage of life. *Journal of Gerontological Social Work*, 129 (2-3), 73-91.
- Utsey, S., Payne, Y., & Jones, A. (2002). Race-related stress, quality of life indicators, and life satisfaction among elderly African Americans. *Cultural Diversity and Ethnic Minority Psychology*, 8 (3), 224-233.
- Wong, P. (2000). Meaning of life and meaning of death in successful aging. In Tomer (Ed.) *Death attitudes and the older adult*. New York: Brunner/Mazel Publishers.
- Zimet, G. D. (1998). The multidimensional scale of perceived social support (MSPSS). In C. P. Zalaquett and R. J. Wood (eds). *Evaluating Stress: A book of resources, Volume 2*. Lanham, MD & London: The Sacrecrow Press, Inc.

Table 1

Sociodemographic Characteristics of Participants

Characteristic	Number	Percent
Age		
65-74	142	65.7
75-84	46	21.3
85 and older	28	13
Gender		
Female	141	65
Male	76	35
Marital Status		
Married	54	24.9
Widowed	101	46.5
Divorced	39	18
Separated	10	4.6
Never Married	13	6
Living Arrangement		
Live Alone	125	57.6
Live with Others	92	42.4
Education		
None	2	.9
1 st -8 th grade	50	23.
9 th -11 th grade	41	18.9
Completed High School/GED	69	31.8
1-3 years College	44	20.3
College Graduate	11	5.1
Monthly Income		
Less than \$500	9	4.3
\$500-\$799	54	25.7
\$800-\$1099	47	22.4
\$1100-\$1449	25	11.9
\$1500-\$1999	22	10.5
\$2000-\$2499	13	6.2
\$2500 or more	40	19
Geographic Location		
Rural	84	38.7
Urban	133	61.3
Previous Occupation		
Professional	51	29.8
Skilled Worker	70	40.9
Unskilled Worker	50	29.3

Table 2

Health Conditions and Activity Interference Levels

Health Conditions	Activity Interference Levels							
	Not at All		A Little		A Lot		Total	
	N	Percent	N	Percent	N	Percent	N	Percent
Arthritis/Rheumatism	26	12	92	42.4	33	15.2	151	69.6
Cancer/Malignant Tumor	1	.5	3	1.4	0	0	4	1.8
Cataracts	7	3.2	22	3.2	5	2.3	34	15.7
Circulation Problems	7	3.2	34	15.7	13	6	54	24.9
Coronary/Heart Disease	3	1.4	19	8.8	9	4.1	31	14.3
Diabetes	14	6.5	42	19.4	15	6.9	71	32.7
Effects of Stroke	5	2.3	10	4.6	8	3.7	23	10.6
Foot Problems	6	2.8	33	15.2	13	6	52	24
Glaucoma	4	1.8	26	12	6	2.8	36	16.6
Hypertension	20	9.2	82	37.8	23	10.6	125	57.6
Kidney Problems	3	1.4	7	3.2	4	1.8	14	6.5
Liver Problems	2	.9	1	.5	0	0	3	1.4
Lung Problems	3	1.4	8	.7	2	.9	13	6
Prostate Problem	1	.5	5	2.3	6	2.8	6	2.8
Stomach Problems	8	3.7	42	19.4	13	6	63	9
Thyroid Problems	3	1.4	3	1.4	1	.5	7	3.2
Urinary/Bladder Problems	3	1.4	11	5.1	4	1.8	18	8.3

Note: Percentages are based on the number responding.